

**FAX COVER SHEET**

TO	Attn: OIPE Customer Service
COMPANY	USPTO
FAX NUMBER	17037464060
FROM	Tracy Druce
DATE	2004-10-06 21:28:38 GMT
RE	Application No. 10/707,251 - MISSING PARTS FILING - Our 07589.0145.PCUS00

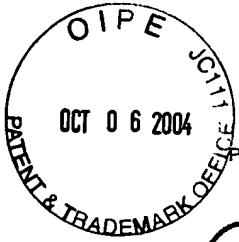
COVER MESSAGE

Please enter the attached which is being provided in response to the Notice to File Missing Parts (9 sheets total). THANK YOU.

- Tracy W. Druce

GET FREE ONLINE FAX DELIVERY FROM eFAX

WWW.EFAX.COM

Please type a plus sign (+) inside this box → ☒

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

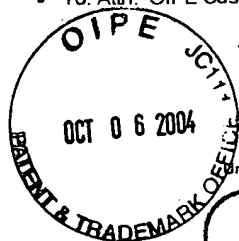
TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/707,251
	Filing Date	12/01/2003
	First Named Inventor	AHLBERG
	Group Art Unit	3612
	Examiner Name	Not Assigned
Total Number of Pages in This Submission	Attorney Docket Number	07589.0145.PCUS00

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input checked="" type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Proposed Amended Drawings <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Declaration/Power of Attorney - Revocation of Prior Powers <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	NOVAK DRUCE, LLP Tracy W. Druce
Date	10/06/2004

CERTIFICATE OF TRANSMISSION			
I hereby certify that this correspondence and any documents referred to herein are being facsimile transmitted to Attn: OIPE, Customer Service, USPTO, Arlington, VA. at fax no. 703.746.4060 on: <u>10/06/2004</u>			
Typed or printed name	Daniel Hernandez		
Signature		Date	10/06/2004

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark



PTO/SB/17 (10-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 2004

Patent fees are subject to annual revision.

Complete if Known

Application Number	10/707,251
Filing Date	12/01/2003
First Named Inventor	AHLBERG
Examiner Name	Not Assigned
Group / Art Unit	3612
Attorney Docket No.	07589.0145.PCUS00

TOTAL AMOUNT OF PAYMENT (\$) 920

METHOD OF PAYMENT (check all that apply)				FEE CALCULATION (continued)																																																																																																																																																				
<input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None				3. ADDITIONAL FEES																																																																																																																																																				
<input type="checkbox"/> Deposit Account: Deposit Account Number: 141437 Deposit Account Name: NOVAK DRUCE, LLP				<table border="1" style="width: 100%;"> <thead> <tr> <th>Fee Code</th> <th>Large Entity Fee (\$)</th> <th>Small Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>105</td> <td>130</td> <td>205</td> <td>65</td> <td>130</td> </tr> <tr> <td>127</td> <td>50</td> <td>227</td> <td>25</td> <td></td> </tr> <tr> <td>139</td> <td>130</td> <td>139</td> <td>130</td> <td></td> </tr> <tr> <td>147</td> <td>2,520</td> <td>147</td> <td>2,520</td> <td></td> </tr> <tr> <td>112</td> <td>920*</td> <td>112</td> <td>920*</td> <td></td> </tr> <tr> <td>113</td> <td>1,840*</td> <td>113</td> <td>1,840*</td> <td></td> </tr> <tr> <td>115</td> <td>110</td> <td>215</td> <td>55</td> <td></td> </tr> <tr> <td>116</td> <td>400</td> <td>216</td> <td>200</td> <td></td> </tr> <tr> <td>117</td> <td>920</td> <td>217</td> <td>460</td> <td></td> </tr> <tr> <td>118</td> <td>1,440</td> <td>218</td> <td>720</td> <td></td> </tr> <tr> <td>128</td> <td>1,960</td> <td>228</td> <td>980</td> <td></td> </tr> <tr> <td>119</td> <td>320</td> <td>219</td> <td>160</td> <td></td> </tr> <tr> <td>120</td> <td>320</td> <td>220</td> <td>160</td> <td></td> </tr> <tr> <td>121</td> <td>280</td> <td>221</td> <td>140</td> <td></td> </tr> <tr> <td>138</td> <td>1,510</td> <td>138</td> <td>1,510</td> <td></td> </tr> <tr> <td>140</td> <td>110</td> <td>240</td> <td>55</td> <td></td> </tr> <tr> <td>141</td> <td>1,280</td> <td>241</td> <td>640</td> <td></td> </tr> <tr> <td>142</td> <td>1,280</td> <td>242</td> <td>640</td> <td></td> </tr> <tr> <td>143</td> <td>460</td> <td>243</td> <td>230</td> <td></td> </tr> <tr> <td>144</td> <td>620</td> <td>244</td> <td>310</td> <td></td> </tr> <tr> <td>122</td> <td>130</td> <td>122</td> <td>130</td> <td></td> </tr> <tr> <td>123</td> <td>50</td> <td>123</td> <td>50</td> <td></td> </tr> <tr> <td>126</td> <td>180</td> <td>126</td> <td>180</td> <td></td> </tr> <tr> <td>581</td> <td>40</td> <td>581</td> <td>40</td> <td></td> </tr> <tr> <td>146</td> <td>740</td> <td>246</td> <td>370</td> <td></td> </tr> <tr> <td>148</td> <td>740</td> <td>249</td> <td>370</td> <td></td> </tr> <tr> <td>179</td> <td>740</td> <td>279</td> <td>370</td> <td></td> </tr> <tr> <td>169</td> <td>900</td> <td>169</td> <td>900</td> <td></td> </tr> </tbody> </table>				Fee Code	Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid	105	130	205	65	130	127	50	227	25		139	130	139	130		147	2,520	147	2,520		112	920*	112	920*		113	1,840*	113	1,840*		115	110	215	55		116	400	216	200		117	920	217	460		118	1,440	218	720		128	1,960	228	980		119	320	219	160		120	320	220	160		121	280	221	140		138	1,510	138	1,510		140	110	240	55		141	1,280	241	640		142	1,280	242	640		143	460	243	230		144	620	244	310		122	130	122	130		123	50	123	50		126	180	126	180		581	40	581	40		146	740	246	370		148	740	249	370		179	740	279	370		169	900	169	900	
Fee Code	Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid																																																																																																																																																				
105	130	205	65	130																																																																																																																																																				
127	50	227	25																																																																																																																																																					
139	130	139	130																																																																																																																																																					
147	2,520	147	2,520																																																																																																																																																					
112	920*	112	920*																																																																																																																																																					
113	1,840*	113	1,840*																																																																																																																																																					
115	110	215	55																																																																																																																																																					
116	400	216	200																																																																																																																																																					
117	920	217	460																																																																																																																																																					
118	1,440	218	720																																																																																																																																																					
128	1,960	228	980																																																																																																																																																					
119	320	219	160																																																																																																																																																					
120	320	220	160																																																																																																																																																					
121	280	221	140																																																																																																																																																					
138	1,510	138	1,510																																																																																																																																																					
140	110	240	55																																																																																																																																																					
141	1,280	241	640																																																																																																																																																					
142	1,280	242	640																																																																																																																																																					
143	460	243	230																																																																																																																																																					
144	620	244	310																																																																																																																																																					
122	130	122	130																																																																																																																																																					
123	50	123	50																																																																																																																																																					
126	180	126	180																																																																																																																																																					
581	40	581	40																																																																																																																																																					
146	740	246	370																																																																																																																																																					
148	740	249	370																																																																																																																																																					
179	740	279	370																																																																																																																																																					
169	900	169	900																																																																																																																																																					
1. BASIC FILING FEE <table border="1" style="width: 100%;"> <thead> <tr> <th>Large Entity Fee Code</th> <th>Large Entity Fee (\$)</th> <th>Small Entity Fee Code</th> <th>Small Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>101</td> <td>740</td> <td>201</td> <td>370</td> <td>Utility filing fee</td> <td>790</td> </tr> <tr> <td>106</td> <td>330</td> <td>206</td> <td>165</td> <td>Design filing fee</td> <td></td> </tr> <tr> <td>107</td> <td>510</td> <td>207</td> <td>255</td> <td>Plant filing fee</td> <td></td> </tr> <tr> <td>108</td> <td>740</td> <td>208</td> <td>370</td> <td>Reissue filing fee</td> <td></td> </tr> <tr> <td>114</td> <td>160</td> <td>214</td> <td>80</td> <td>Provisional filing fee</td> <td></td> </tr> </tbody> </table>				Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid	101	740	201	370	Utility filing fee	790	106	330	206	165	Design filing fee		107	510	207	255	Plant filing fee		108	740	208	370	Reissue filing fee		114	160	214	80	Provisional filing fee		2. EXTRA CLAIM FEES <table border="1" style="width: 100%;"> <thead> <tr> <th>Total Claims</th> <th>Extra Claims</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> </tbody> </table>				Total Claims	Extra Claims	Fee from below	Fee Paid	0	0	0	0	0	0	0	0	0	0	0	0																																																																																													
Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid																																																																																																																																																			
101	740	201	370	Utility filing fee	790																																																																																																																																																			
106	330	206	165	Design filing fee																																																																																																																																																				
107	510	207	255	Plant filing fee																																																																																																																																																				
108	740	208	370	Reissue filing fee																																																																																																																																																				
114	160	214	80	Provisional filing fee																																																																																																																																																				
Total Claims	Extra Claims	Fee from below	Fee Paid																																																																																																																																																					
0	0	0	0																																																																																																																																																					
0	0	0	0																																																																																																																																																					
0	0	0	0																																																																																																																																																					
SUBTOTAL (1) (\$) 790				SUBTOTAL (2) (\$) 0																																																																																																																																																				
2. EXTRA CLAIM FEES <table border="1" style="width: 100%;"> <thead> <tr> <th>Large Entity Fee Code</th> <th>Large Entity Fee (\$)</th> <th>Small Entity Fee Code</th> <th>Small Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>103</td> <td>18</td> <td>203</td> <td>9</td> <td>Claims in excess of 20</td> <td></td> </tr> <tr> <td>102</td> <td>84</td> <td>202</td> <td>42</td> <td>Independent claims in excess of 3</td> <td></td> </tr> <tr> <td>104</td> <td>280</td> <td>204</td> <td>140</td> <td>Multiple dependent claim, if not paid</td> <td></td> </tr> <tr> <td>109</td> <td>84</td> <td>209</td> <td>42</td> <td>** Reissue independent claims over original patent</td> <td></td> </tr> <tr> <td>110</td> <td>18</td> <td>210</td> <td>9</td> <td>** Reissue claims in excess of 20 and over original patent</td> <td></td> </tr> </tbody> </table>				Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid	103	18	203	9	Claims in excess of 20		102	84	202	42	Independent claims in excess of 3		104	280	204	140	Multiple dependent claim, if not paid		109	84	209	42	** Reissue independent claims over original patent		110	18	210	9	** Reissue claims in excess of 20 and over original patent		SUBTOTAL (3) (\$) 130																																																																																																																
Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid																																																																																																																																																			
103	18	203	9	Claims in excess of 20																																																																																																																																																				
102	84	202	42	Independent claims in excess of 3																																																																																																																																																				
104	280	204	140	Multiple dependent claim, if not paid																																																																																																																																																				
109	84	209	42	** Reissue independent claims over original patent																																																																																																																																																				
110	18	210	9	** Reissue claims in excess of 20 and over original patent																																																																																																																																																				

*or number previously paid, if greater; For Reissues, see above

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) 130

SUBMITTED BY		Complete if applicable			
Name (Print/Type)	Tracy W. Druce	Registration No. Attorney/Agent	36,493	Telephone	202.293.7333
Signature		Date	10/06/2004		

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
United States Patent and Trademark Office
Address: COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, Virginia 22313-1450
www.uspto.gov

APPLICATION NUMBER	FILING OR 371 (c) DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
10/707,251	12/01/2003	Jorgen AHLBERG	07589.0145.PCUS00

28694
TRACY W. DRUCE, ESQ.
1496 EVANS FARM DR
MCLEAN, VA 22101

CONFIRMATION NO. 1250

FORMALITIES LETTER



OC000000013461075

Date Mailed: 08/06/2004

NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

FILED UNDER 37 CFR 1.53(b)

Filing Date Granted

Items Required To Avoid Abandonment:

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The statutory basic filing fee is missing.
Applicant must submit \$ 770 to complete the basic filing fee for a non-small entity. If appropriate, applicant may make a written assertion of entitlement to small entity status and pay the small entity filing fee (37 CFR 1.27).
- The oath or declaration is missing.
A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(e) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.

SUMMARY OF FEES DUE:

Total additional fee(s) required for this application is \$900 for a Large Entity

- \$770 Statutory basic filing fee.
- \$130 Late oath or declaration Surcharge.

Replies should be mailed to: Mail Stop Missing Parts
Commissioner for Patents
P.O. Box 1450
Alexandria VA 22313-1450

10/08/2004 AWONDAF1 00000009 10707251

01 FC:1001 790.00 OP
02 FC:1051 130.00 OP

Page 2 of 2

*A copy of this notice **MUST** be returned with the reply.*



Customer Service Center

Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE